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PTO/SB/17 (10-08)

Approved for the amongst consense to: CIMB con 1-003,
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A Reduction A		ersons are required to	espond to a conection or into			and OMB comboi fiding		
Effective of Fees pursuant to the Consolidated	n 12/08/2004. Appropriations	Act, 2005 (H.R. 4818).		,	e if Known			
	Application Number	10/539,787						
_	FEE TRANSMITTAL		Filing Date	June 17,	une 17, 2005			
Fort	For FY 2009			Stefan A	Stefan ABERG			
Applicant claims small enti	Applicant claims small entity status. See 37 CFR 1.27			Courtney D. Fields				
		Art Unit	2137					
TOTAL AMOUNT OF PAYMEN	Attorney Docket No.	915-008	915-008.036					
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):								
Deposit Account Deposit Account Number: 23-0442 Deposit Account Name:								
For the above-identified	deposit accou	int, the Director is he	ereby authorized to: (check	k all that ap	pply)			
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s)								
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
information and authorization on F		•						
FEE CALCULATION								
1. BASIC FILING, SEARCH		_						
FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity								
Application Type F		(\$) Fee (\$) <u>Fee (\$)</u> <u>Fee</u>		e (\$)	Fees Paid (\$)		
Utility	330 16	5 540	270 22	0 11				
Design 2	220 11	0 100	50 14	0 7	70 -			
Plant	220 11	0 330	165 17	0 8	35 -			
Reissue	330 16	5 540	270 65	0 32	25 -			
Provisional	220 11	0 0	0	0	0 -			
2. EXCESS CLAIM FEES Small Entity								
Fee Description Each claim over 20 (incl	udina Reissi	100)		1	ee (\$) <u>F</u> 52	ee (\$) 26		
Each independent claim					220	110		
Multiple dependent clain		8			390	195		
						dent Claims		
20 or HP =	_12x		524.00		Fee (\$)	Fee Paid (\$)		
HP = highest number of total clair Indep. Claims Ex	ns paid for, if gr t ra Claims		e Paid (\$)					
3 - 3 or HP =	<u>0</u> ×	=						
HP = highest number of independ	•	for, if greater than 3.						
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 = /50 = (round up to a whole number) x = Fee (\$) = Fee Paid (\$)								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge):								
SUBMITTED BY Registration No.								
Signature Registration No. (Attorney/Agent) 31,391 Telephone (203) 261-1234								
Name (Print/Type) Francis J. Mag	juire ()	<u> </u>		Date /2 - /	Nov -08		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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